Case 3:15-cv-00026-DHB-BKE POCHINERIA INFINITION 1705 MP AGENT OF 8

UNDER THE CIVIL RIGHTS ACT. 42 U.S.C. § 1982 is the UNTTED STATES DISTRICT COURT for the SOUTHERN DISTRICT of GEORGIA

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Mich	ael Gary Smith
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Escap above	full name of plaintiff or plaintiffs)
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K4	Change
Murra	Marie Yawn
Opposite the same	A II
William	- C. Danforthy
Departm	ent of Correction, etc.
(Enter above	full name of defendant or defendants)
I. Previ	ous lawsuigs
Α.	Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action?
19	If your answer to A is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline.)
	1. Parties to this previous lawsuit:
e	1. Panda to this provide
•	Plaintiff:
	Defendants:
	is age sour name the county):
	2. Court (if federal court, name the district; if state court, name the county):
	Date of the page
	3. Docket number:
	4. Name of judge assigned to case:

(for example, was the case dismissed? appealed? is it still pending?): Approximate date of filing lawsuit: . Approximate date of disposition: 7. Were you allowed to proceed in forma pauperis (without prepayment of 8. iees)? While incarcerated or detained in any facility, have you brought any lawsuits in federal court which deal with facts other than those involved in this action? В. If your answer to B is yes, describe each lawsuit in the space below. (If there is more than one lawsuit describe the additional lawsuits on another piece of paper, using the same outline.) Paries to previous lawsuit: 1. Michael Gary Smith Plainniffi: Clabby Defendants: Court (name the district): 2. Northern district of Georgia Supreme. 1:05-CV-00395-MSH Docker number: 3. Name of judge assigned to case: _ 4. (for example, was the case dismissed? appealed? is it still pending?): 5. Dismissed Approximate date of filing lawsuit: March-18-2005 6.

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- G	€.	Were you allowed to proceed in forma pauparis (without prepayment of fees)? Yes You No
3	раир	o any lawruit filed in federal court where you were allowed to proceed in forma peris, was any suit dismissed on the ground that it was frivolous, malicious, or d to state a claim? Yes
6	L	If your answer to C is yes, name the court and docker number for each case:
26 264 (Meles) 12555 25		Northern distric of Georgia 1:05-CV-00395-MSH Northern distric Georgia Supreme Court 1:04-CV-00350-MSH Northern distric Georgia Supreme 1:04-CV-00115-MSH Worthern distric Georgia Supreme 1:07-CV-01303-MSH
	590	Toll State Posson
II.		sens confinemens: Teifair State Prison
	A. Is the	ere a prisoner grievance procedure in this institution? Yes No
	B. Did ;	you present the facts relating to your complaint to the appropriate grievance nittee?
	C. If you	ur answer to B is yes:
9	ĩ.	What steps did you take? I have filed numerous of grievances to Chief Counselor Clemon's, and
â	_U - 8	even written the warden personally atleast twice (two times).
	2.	What was the result? This institution refused to file grie Vances.
(RE		
5.		
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(2)	£ 2	3
	6	
a a s Sanata est	_ a seeg	

• •	Case 3:1	15-cv-00026-DHB-BKE Document 1 Filed 02/17/15 Page 4 of 8 3. Did you appeal any adverse decision to the highest level possible in the administrative procedure? Yes
.स इ. इ.	a 4: *	If yes, what was the result? I have written the worden addressing the 185me to medical refuse to treat me and that Chief Counselor is not filing my grievances.
9	D.	If you did not utilize the prison grievance procedure, explain why not:
	all secretarions in the same of	
u 9	IV. Parie	음성 -
	Α.	(In Item A below, list your name as plaintiff and current address. Provide the name and address of any additional plaintiffs on an attached sheet.) Name of plaintiff: Address: Michael Crary Smith Telfair State Prison P.O. Box 549 Helena, Ga 31037
	¥	(In Item B below, list the defendant's full name, position, place of employment, and current address. Provide the same information for any additional defendants in Item C below.)
	В.	Name of defendant Murray Cheney Position: Place of employment: 210 long bridge Road Current address: Heleng, Ga 31037
世 輔	C.	Additional desendants: Branches (Marie Youn)
a Ae		William C. Danfort, Laurie
e F	185	4
	2.	

V. Statement of Claim

State here as briefly as possible the FACTS in your case. Describe how each defendant is personally involved in the depriving you of your rights. You must include relevant times, dates, places, and names of witnesses. DO NOT GIVE LEGAL ARGUMENTS OR CITE ANY CASES OR STATUTES. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Anach extra sheets if necessary.)

I am in interest imminent danger for my life and safety in general, due to each day & am housed/imprisoned at Terfair State Prison, my health is gradually disintegrating because medical refuse to treat my illness which has worsened under being neglected. My Skin is infected. I fear that gangrene will dovelop thus threatening my life. I have filed numerous of sick call requests, asking the medical department, to prescribe a medicated soap or medication lation, to help my damage skin because the State Soup (GCI) is too harsh for my flesh causing my Shin to burn, break out in rashes, dry my Skin until it Start cracking and oozing an odorous puss. And the hard water only ITritate my affliction. At one time, medical ordered a cream called "Triantinolonie Acetonide." They abruptly took me off. In a sick call request that tive filed 11-6-14, Marie Yawn, responded back Nov-12-14. " Tac is not for long term use. You need to use a lotion or a different soap. " However, & informed medical that & am an indigent inmate I am not financially able to purchase any hygrenic items from the prison Commissary. Yet medical continue to deny me medical treatment. I am being neglected treatment. On Aug-8-2014, + filed a sick call request, informing medical that since they took my soft shoe profile, when & arrived at Terfair State Prison, Jan-13-14, and was made forced to

wear the state boots, when they were aware of my feet condition, for 2 and a half months, have worsen the conditions of my feet. The prison Medical department, never had the right to rescind my snoe profile to beable to wear medical tennis snoes and not boots. I have a condition of fallen arches and bunions on both foot. So, & weren't supposed to made to wear boots. By me being forced to wear boots, have worsened my condition. z've had my soft shoe profile penewed since then, but the damage has already been done. I've asked in numerous sick call request to be seen by an orthepedic, due to my bones deformities has increased. When & walk, & feel Sharp Pain blossoms in the middle of my feet. Like each step & make, my muscles are being Shredded. And I also adviced medical in a sick Colli request, that It 9180 feels like the ligaments that holds the back too to the other bones are being frictioned away when I walk becase I feel the bones lubbing against each other. My feet has swollen up so bad, that & couldn't wark from the fluid of inflimmation of the loints. Yet, medical refuse to allow me to see an orthopedic. 8-4-14, a medical Staff returned my sick call request, that I'am Scheduled to be seen. However, today is FEB-Q-2015, and z have not Seen an orthepedic. Medical will not help me. All they say, when I get out/release from prison I need to have surgery. I don't have to get out to have this surgery, conducted when the states are able to per. form it while I'm incarcerated. I have a years left. That's a long time to put a surgery off. Plus, medical will not prescribed me with no kind of PainKiller to help alleviate my pain and Suffering. On Oct-6-14, 2 also advised Medreal (Marie Yawn), that I need high top snoes, due to low Cut

Shoes do not support my feet condition. Oct - 9-14, Marie Yawn, responded

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back: "We don't issue high top Shoes. All shoes are veicro. You can order Shoes through Acess Catalog. However, & am an indigent inmate. & cannot purchase no Item from the prison Commissary. Yet, Medical neglect my physical illness in not prescribing me with the appropriate footwear that will correct / Comfort my disability. On 9-22-14, & also filed a sick call request, Stating that & need a pair of size lo 2, tennis Shoes. 9-23-2014, R. Rowland (MRC), responded back. & only have a size II—will that work? & cannot even get a size Shoe that rightfully fit. Please help.

I've filed greevances. The warden said, I'll end up getting my head cracked open. I have been denved the right to cuttend general population because of grivances I've filed. I've been in segregation since oct-16-2014.

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Relief

arguments. Cité no cases or statutes.
I want the court to instruct medical to Sheedule me
an appointment with a certified Dermatologist, to remedy,
current skin promblem. And to prescribe a medicated soc
and lotion that will heal my damage skin from the state
Toronte Soap (G(I).
I ask the court to also instruct Medical to set an ap
pointment with an orthopedic, to determine the new
problem with my Feet, that arose from being forced to
wear unauthorize boots. To prescribe a painkiller to help
alleviate this excruciating pain.
quevian in croscialing plan
And + ask to be awarded \$ 17,501, U.S.
AND F ONE IS GEOGRAPH TO 11, SOI, M. S.
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w w
I declare under penalty of perjusy that the foregoing is true and correct
Signed this 9 day of FE #2015.
Prisoner No. 1092479 Wichael G. Smith (Signature of Plaintiff)